## Agency Liaison's Evaluation

The quality of the Shared Neutrals ADR Program (SNAP) is our primary concern. Your role as an agency liaison is vital to the success of SNAP. The SNAP Committee welcomes your frank comments and suggestions. Please answer the questions by circling the response that most accurately represents your views. Please provide whatever comments or suggestions you believe are appropriate. All responses are strictly confidential.

1. How wou	ıld you rate yo	our working rela	tionship w	ith the SNAI	P Intake Coordinator?
5 Excellent	4 Good	3 Average	2 Fair	1 Poor	0 Not Applicable
	nave any sugge e Coordinator		to improve	e your workin	g relationship with the
No Yes					
5 Excellent 4. Do you h	4 Good	3 Average	2 Fair	1 Poor	P Primary Mediator?  0 Not Applicable ag relationship with the
No Yes					

5. How would you rate your working relationship with the SNAP Co-Mediator?								
5 Excellent	4 Good	3 Average	2 Fair	1 Poor	0 Not Applicable			
6. Do you h SNAP Co- M		estions on how t	to improve	e your workin	ng relationship with the			
No Yes								
7. What prol	blems or diffic	culties have you	encounte	red as an Age	ency Liaison?			
8. Do you h	ave any sugge	estions which m	ight make	SNAP more	useful or responsive?			
Agency Liais	son's Name (C	Optional):						
Case Numbe	r (Optional):							

Please fill out and return to the SNAP Committee